

12/09/98  
jc618 U.S. PTO

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PTO/SB/05 (12/97)  
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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No.	01634- P0026C	Total Pages	47
	First Named Inventor or Application Identifier			
	Andrew I. Lemont, et al.			
	Express Mail Label No.	EM 549 545 642 US		

<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents	<b>ADDRESS TO:</b> Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing)	6. <input type="checkbox"/> Microfiche Computer Program (Appendix)
2. <input checked="" type="checkbox"/> Specification [Total Pages 31] (preferred arrangement set forth below) <ul style="list-style-type: none"><li>- Descriptive title of the Invention</li><li>- Cross References to Related Applications</li><li>- Statement Regarding Fed sponsored R &amp; D</li><li>- Reference to Microfiche Appendix</li><li>- Background of the Invention</li><li>- Brief Summary of the Invention</li><li>- Brief Description of the Drawings (if filed)</li><li>- Detailed Description</li><li>- Claims(s)</li><li>- Abstract of the Disclosure</li></ul>	7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) <ul style="list-style-type: none"><li>a. <input type="checkbox"/> Computer Readable Copy</li><li>b. <input type="checkbox"/> Paper Copy (identical to computer copy)</li><li>c. <input type="checkbox"/> Statement verifying identity of above copies</li></ul>
3. <input checked="" type="checkbox"/> Drawings(s) (35 USC 113) [Total Sheets 14]	<b>ACCOMPANYING APPLICATION PARTS</b> <ul style="list-style-type: none"><li>8. <input type="checkbox"/> Assignment Papers (cover sheet &amp; document(s))</li><li>9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (where there is an assignee)</li><li>10. <input type="checkbox"/> English Translation Document (if applicable)</li><li>11. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations</li><li>12. <input checked="" type="checkbox"/> Preliminary Amendment</li><li>13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</li><li>14. <input checked="" type="checkbox"/> Small Entity <input type="checkbox"/> Statement Statement(s) Status still proper and desired</li><li>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</li><li>16. <input type="checkbox"/> Other:.....</li></ul>
4. <input checked="" type="checkbox"/> Oath or Declaration (copy) [Total Pages 2] <ul style="list-style-type: none"><li>a. <input type="checkbox"/> New executed (original or copy)</li><li>b. <input checked="" type="checkbox"/> Copy from prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 5 below]</li><li>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting Inventors(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</li></ul>	
5. <input checked="" type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompa- nying application and is hereby incorporated by reference therein	

17. If a **CONTINUING APPLICATION**, check appropriate box and supply the requisite information  
☐ Continuation ☒ Divisional ☐ Continuation-in-part of prior application No.: 08/763,483

**18. CORRESPONDENCE ADDRESS**

☐ Customer Number of Bar Code Label (Insert Customer No or Attach bar code label here) or ☒ Correspondence address below

NAME	Louis H. Reens, Registration No. 22,588				
ADDRESS	St.Onge Steward Johnston & Reens LLC 986 Bedford Street				
CITY	Stamford	STATE	CT	ZIP CODE	06905-5619
COUNTRY	United States	TELEPHONE	203 324-6155	FAX	203 327-1096

Burden Hour Statement: This form is estimated to take 0.2 hour to complete. Times will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Office, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OF COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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**FEE TRANSMITTAL**

Patent fees are subject to annual revision on October 1.

These are the fees effective October 1, 1997.

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

**Complete if Known**

Application No.	- Pending
Filing Date	December 8, 1998
First Named Inventor	Andrew I. Lemont, et al.
Group Art Unit	
Examiner Name	
Attorney Docket Number	01634-P0026C LHR/WWW

**TOTAL AMOUNT OF PAYMENT**(\$)**539.00****METHOD OF PAYMENT (check one)**

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payment to:
- Deposit Account Number **19-4516**
- Deposit Account Name **St. Onge Steward Johnston & Reens LLC**
- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 ☐ Charge the issue Fee Set in 37 CFR 1.18 of the Mailing of the Notice of Allowance

2. ☒ **Payment Enclosed:**
- ☒ Check ☐ Money ☐ Other Order

**FEE CALCULATION****1. BASIC FILING FEE**

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	760	201	380	Utility filing fee	\$380.00
106	330	206	165	Design filing fee	
107	540	207	270	Plant filing fee	
108	790	208	365	Reissue filing fee	
114	150	214	75	Provisional filing fee	
<b>SUBTOTAL (1)</b>					<b>(\$)</b> 380.00

**2. EXTRA CLAIMS FEES**

Total Claims	Extra Claims	Fee from Below	Fee Paid
29	-20**= 9	X 9 =	81.00
Independent Claims 5	-3 = 2	X 39 =	78.00
Multiple Dependent (No.)		X	

\*\*or number previously paid, if greater; For Reissues, see below

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	78	202	39	Independent claims in excess of 3
104	270	204	135	Multiple dependent claims
108	82	208	41	Reissue independent claims over original patent
110	22	210	11	Reissue claims in excess of 20 and over original patent

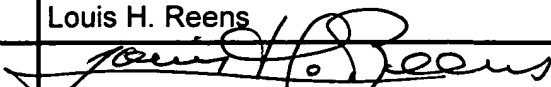
**SUBTOTAL (2)** (\$)**159.00****FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing for or oath	
127	50	227	25	Surcharge - late provisional filing or cover Sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840	113	1,840	Requesting publication of SIR after Examiner Action	
115	110	215	55	Extension for reply within first month	
116	440	216	200	Extension for reply within second month	
117	950	217	475	Extension for reply within third month	
118	1,510	218	755	Extension for reply within fourth month	
128	2,060	228	1,030	Extension for reply within fifth month	
119	310	219	155	Notice of Appeal	
120	310	220	155	Filing a brief in support of an appeal	
121	270	221	135	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,320	241	660	Petition to revive - unintentional	
142	1,320	242	660	Utility issue fee (or reissue)	
143	450	243	225	Design issue fee	
144	670	244	335	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	240	126	240	Submission of Informational Disclosure Stmt	
581	40	581	40	Recording each patent assignment per Property (times number of properties)	
146	790	246	395	Filing a submission after final rejection (37(CFR 1.129(a))	
149	279	249	395	For each additional invention to be Examined (37 CFR 1.129(b))	
Other fee (specify) _____					
Other fee (specify) _____					

\* Reduced by Basic Filing Fee paid

**SUBTOTAL (3)** (\$)**0.00****SUBMITTED BY** St. Onge Steward Johnston & Reens LLC

Complete (if applicable)

Typed or Printed Name	Louis H. Reens	Reg. Number	22,588
Signature		Date	12/09/98
		Deposit Account User ID	19-4516

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